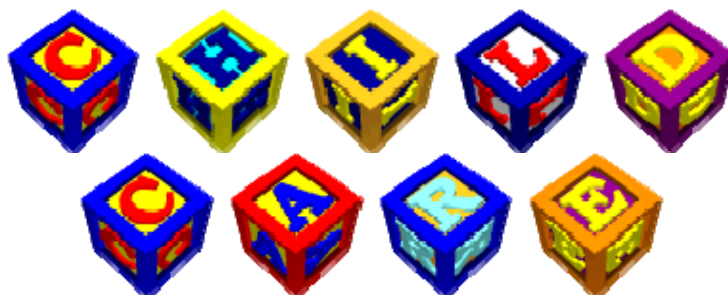


## DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



# COMMUNITY CARE LICENSING DIVISION



## UPDATE

May 2008



### *To the Child Care Community*

Spring is here, and we are sure you are all enjoying the warmer weather and longer days. We are into the sixteenth year of our efforts to keep the child care community informed about licensing programs and services. The Updates continue to be an important method for sharing information. We appreciate your support in sharing these Updates with those in your organization and others interested in child care issues.

Those of you who receive these Updates via email can find the topic of your choice in each Update without having to scroll down. Just put your cursor over the blue highlighted subject heading that you wish to review, hold down the control and shift buttons at the same time, and you will be taken to that area of the Update.

## **TOPIC INDEX**

### **SAFETY FOR KIDS**

#### **TEMPORARY CHANGE IN IMMUNIZATION REQUIREMENTS**

#### **TUBERCULOSIS SKIN TESTING OF CHILDREN IN CHILD CARE CENTERS**

#### **BE AWARE OF IMPOSTERS!**

#### **HEALTHY SCHOOLS ACT-- PEST MANAGEMENT PRACTICES**

#### **SPEAKING OF PESTS!**

#### **LICENSING FEES ISSUES**

#### **EARTHQUAKE PREPAREDNESS TIPS**

#### **SPRING WEATHER HEALTH TIPS**

#### **LICENSING MANAGEMENT CHANGES**

#### **LICENSED CHILD CARE STATISTICS**

#### **SUMMARY**

### **SAFETY FOR KIDS**

A great resource for licensees and parents is Safe Kids California, a local subsidiary of Safe Kids USA, which brings together health and safety experts; educators and representatives from foundations; government agencies; civic organizations; and corporations to educate families on childhood accidental injury prevention. They have recently published a notification of [toy recalls](#) which includes valuable information regarding toy safety, where shoppers can sign up to receive email alerts regarding recalls, and where to report safety concerns. To access additional information regarding safety for kids, please visit their website at [www.usa.safekids.org](http://www.usa.safekids.org).



## TEMPORARY CHANGE IN IMMUNIZATION REQUIREMENTS

A nationwide shortage of the Haemophilus Influenzae type b (Hib) vaccine has recently been announced. In response, the California Department of Public Health (CDPH) has issued a [Special Immunization Schedule for 2008 \(SIS\)](#) and California Immunization Requirements for Child Care fact sheet, which is available in both [English](#) and [Espanol](#). The SIS abbreviates the Hib requirement as follows:

- Effective immediately, children ages 15 months to 4 ½ years may enter day care *if they have received one dose of the Hib vaccine at any age*
  - The Department's Child Care Licensing Program has issued a statewide policy to ensure that care providers meeting this interim guideline are not cited
- Child care providers are required to comply with all other immunization requirements for licensed child care facilities, as they remain the same, including:
  - Parents' rights to refuse immunizations due to personal beliefs
  - Allowable exceptions (e.g., a medical exemption)
- The SIS is expected to be in effect through 2008

Please direct any questions you may have to the [Immunization Coordinator at your local health department](#) or your local [Child Care Program Regional Office](#).

## TUBERCULOSIS SKIN TESTING OF CHILDREN IN CHILD CARE CENTERS

On August 22, 1997, Martha Lopez, the Deputy Director of the Community Care Licensing Division (CCLD) at that time, issued a memo to all Regional Managers and Child Care District Office Managers containing revised policy regarding Mantoux skin testing of children who attend Child Care Centers (CCC). The revised Tuberculosis (TB) policy was issued at the request of the Division of Communicable Disease Control at CDPH.

Periodically CDPH and some Regional Offices receive calls concerning the discrepancy between state regulations and national consensus recommendations. To prevent further confusion, we would appreciate your help in ensuring that all staff are aware of the following information and policy.

The CDPH brought to our attention in February 1996, the publication titled "Update on Tuberculosis Skin Testing of Children," by the Committee on Infectious Diseases of the American Academy of Pediatrics (AAP). This update noted that:

. . . routine tuberculin testing, including school-based programs that include populations at low risk, has either a low yield of positive results or a large number of false-positive results and represents an inefficient use of limited health care resources. Therefore, children without risk factors do not need to have routine tuberculin skin testing.

Children at increased risk of acquiring latent TB infection and active disease are now identified through routine health care evaluations and investigation of contacts with persons with TB. The 2006 AAP recommendations included replacing the routine skin testing of large populations of children with focused medical screenings of children at first contact with a child and every six months thereafter for the first 2 years of life. After 2 years of age, the medical risk assessment should be performed annually. Tuberculin skin testing should be performed if TB risk is determined. Recommendations for infants, children and adolescents are as indicated:

- Contacts with people who have confirmed or suspected contagious TB (contact investigation)
- Have radiographic or clinical findings suggesting TB disease
- Are immigrating from countries with endemic infection (Asia, Africa, countries of the former Soviet Union, and Latin America), including international adoptees
- Travel histories to countries with endemic infection and substantial contact with indigenous people from such countries
- Live in out-of-home placements
- Have, or are suspected to have, HIV infection
- Live among, or are frequently exposed to, individuals who are homeless, migrant farm workers, users of street drugs, or residents in nursing homes
- Have other medical conditions, including diabetes mellitus, chronic renal failure, malnutrition or acquired immunodeficiencies that would enhance the possibility for progression to disease if infected

Based on this finding, the following policy has been in effect since 1997:

Any child who attends a child care center is required to have a Mantoux skin test for TB only if the child's medical assessment indicates that the child has risk factors for TB. All children must be screened for risk factors for TB as part of the medical assessment. However, skin testing is required only if determined to be necessary by a physician based on the child's risk factors for TB.

Personnel in child care facilities and any adult in a family child care home at the time children are in care, are to continue to be tested for TB as required by the regulations.

In addition, children in residential community care facilities, who automatically have the risk factor of living in an out-of-home placement, are to continue to be tested for TB as required by the regulations.

The [LIC 701](#) form, "Physician's Report-Day Care Centers," was revised at that time to comply with the revised policy (please see the attached sample of a current LIC 701). The LIC 701 has an area at the bottom of the form for the child's physician (or designee) to indicate that the child has been screened for risk factors for TB.

If you have questions regarding this policy, please contact Ruth McGregor, Chief, Child Care Policy and Advocacy Unit, Child Care Program Office, at (916) 229-4500.

### **BE AWARE OF IMPOSTERS!**

In the [January 2008 Child Care Update](#), we notified care providers that persons posing as representatives of non-existent state agencies have been attempting to gain entry into child care facilities claiming they need to review staff files to ensure the requirements for Cardiopulmonary Resuscitation (CPR), First Aid and preventative health practices are met. Child care providers were alerted that this is not a state agency and they have no authority to enter licensed child care facilities to conduct inspection of staff personnel files.

This is to call your attention to a similar situation that has recently occurred whereby a person representing himself as an American Red Cross instructor arranged to meet with a care provider regarding the validity of her first aid training and told her she could be shut down and fined by the Department.

Remember that licensing representatives are required to show picture identification prior to entering a licensed facility. If you question the authority of anyone trying to gain entrance into your facility, you have the right to refuse entry. You may also call your local licensing office to verify the identification of licensing staff. However, if anyone tries to enter your facility forcefully, you should call 911 immediately.

## HEALTHY SCHOOLS ACT- PEST MANAGEMENT PRACTICES

The Healthy Schools Act of 2006 expanded the Healthy Schools Act to include CCCs. The purpose of the Act is to facilitate the adoption of effective, least toxic pest management practices at school sites. This includes voluntary adoption of Integrated Pest Management (IPM) practices. The CCLD does not enforce compliance with the Healthy Schools Act. However, Department of Pesticide Regulation staff will be conducting trainings for Licensing staff in the coming year so that Licensing staff will understand what the Healthy Schools Act involves, in case staff gets questions from providers about the Act and IPM.

## SPEAKING OF PESTS!

It's mosquito season again, and with the arrival of those annoying pests comes the threat of the West Nile Virus (WNV). All Californians need to follow simple precautions to protect themselves from mosquito bites and possible exposure to WNV. Check out our [Tip of the Month!](#)

The public is encouraged to assist in the efforts to detect and monitor WNV by calling the CDPH WNV hotline if they find a dead crow, raven, magpie, jay, hawk or squirrel, as they play an important role in maintaining and spreading this virus. The toll free hotline to report dead birds is 877-WNV-BIRD (877-968-2473). More information is available on the CDPH website at [www.westnile.ca.gov](http://www.westnile.ca.gov).

## LICENSING FEES ISSUES

When paying licensing fees, here are some tips that will help make the payment and reimbursement process function smoothly for both you and the Department:

- *Orientation fees are non-refundable.* Please do not request reimbursement of orientation fees unless the overpayment was the result of a Department error or other genuine overpayment. Refund requests will require full documentation (e.g., copies of cancelled checks, money orders, cashier's checks, etc.)
- *Always put your facility number on your check, money order or cashier's check.* This will prevent your payment from being distributed to incorrect accounts within the Department. If it is not clear what your payment is for and where it should be applied, it will be deposited in the Department's General Fund and your bill will not reflect that you made a payment. It is very difficult and time-consuming to track a check that does not have proper identification. This will result in you being billed a late fee
- In those situations where you possess multiple licenses, for example, a Child Care Center license and an Infant Center license, you must indicate which facility you are paying the fee for by writing the appropriate facility number on your check. If this isn't done, Accounting makes its best guess as to where to apply

the fee and the fee could be applied to the wrong facility account. This could result in a late fee assessment

- If you own more than one facility and would like to designate a primary facility to receive one bill for all facilities collectively (consolidate), you must let your local Child Care Regional Office know so that the adjustments can be made in the billing system as soon as possible—this includes *cancelling* consolidation as well. Failure to do this will result in confused, improper billing
- If you receive your annual bill and plan to move shortly, *you must still pay the annual fee for your current address in addition to the change of location fee*
- There are no provisions for accepting partial payments. If full payment is not received by the due date (anniversary), you will be subject to late fees based on the original annual assessment, not on the outstanding balance
- The billing system automatically applies payments to the most outstanding debt
- You will be charged a late fee if:
  - we did not receive your payment on time
  - you sent only a partial payment
  - this year's check went to pay for last year's nonpayment or outstanding balance
  - you made an online payment with your credit card and it was not received by midnight of the license effective due date
- If you have a question or concern regarding your fee or bill, you must contact your local [Child Care Regional Office](#) for assistance
  - ***Never call the Department's Program Office, Central Operations Branch, Accounting, or Cashiering as you will be redirected to your local Child Care Regional Office***

For your information, within the next month, we will be publishing more detailed information regarding the fee process which should clarify a lot of fee issues for licensees. Be on the lookout for a Frequently Asked Questions (FAQs) document which will be available on the CCLD website.

## EARTHQUAKE PREPAREDNESS TIPS

April was Earthquake Preparedness Month and in light of the recent earthquakes, this is the time for everyone to practice the Duck, Cover & Hold drill. As in any emergency, it is so important to be prepared in the first

seconds of an earthquake. Please review the following tips and procedures on what to do during an earthquake, such as immediately taking cover under desks, doorways, or similar protected places, and not using elevators. In addition, do not leave the building to go outdoors. Most serious injuries occur from falling objects outside.

### **Tips in Preparing Families for an Earthquake:**

*When preparing for an earthquake, plan on having enough supplies to get you and your family through at least the first 72 hours. After a major earthquake, there's a good chance that traditional emergency response teams will be too busy to take care of you and your family at first.*

- Decide where and when to reunite your family should you be apart when an earthquake happens
- Make plans to have someone pick your children up at school or daycare Centers if you are unable to get to them
- Conduct Earthquake: Duck, Cover & Hold drills
- Know the safest place in each room because it will be difficult to move from one room to another during a quake
- Learn how to shut off the valves for water, gas and electricity
- Make copies of vital records and keep them in a safe deposit box in another city or state
- Keep extra cash and change. If electricity is out, you will not be able to use an ATM

### **General Tips:**

- Stay away from heavy furniture, appliances, large glass panes, shelves holding objects, and large decorative masonry, brick or plaster such as fireplaces
- Keep your hallway clear. It is usually one of the safest places to be during an earthquake

### **Here are some tips for preparing children for earthquakes:**

*For infants and toddlers, special emphasis should be placed on making their environment as safe as possible.*

- Cribs should be placed away from windows and tall, unsecured bookcases and shelves that could slide or topple
- A minimum of a 72-hour supply of extra water, formula, bottles, food, juices, clothing, disposable diapers, baby wipes and prescribed medications should be stored where it is most likely to be accessible after an earthquake
- Show children the safest places to be in each room when an earthquake



hits

- Use sturdy tables to teach children to Duck, Cover & Hold

### **Tips for Pet Owners:**

*Before an earthquake, store enough food and water to last for 72 hours, preferably for one week. Prepare a shelter or evacuation kit for your pet, including an unbreakable dish, veterinarian records, a restraint (leash or pet carrier) and medication with instructions.*

- Arrange for a neighbor to take care of your pet if you are not able to get home after an earthquake
- Do not try to hold onto your pet during the shaking. Animals will instinctively protect themselves and hide where they are safe. If you get in their way, even the nicest pets can turn on you
- Pets get stressed just like people do and need time to readjust
- If you have outdoor pets, you should keep them indoors until the aftershocks have subsided and they have calmed down
- If you must evacuate your home, leave your pet secured in a safe place
- Pets will not be allowed at shelters. Be sure to leave plenty of clean water and food
- If possible, visit your pet daily until you can return home

### **Tips for the Elderly:**

#### **Before an Earthquake**

- Eliminate hazards. Make it as easy as possible to quickly get under a sturdy table or desk for protection
- Anchor special equipment such as telephones and life support systems. Fasten tanks of gas, such as oxygen, to the wall
- List all medications, allergies, special equipment, names and numbers of doctors, pharmacists and family members. Make sure to have this list available at all times
- Have a whistle to signal for help
- Keep an extra pair of eyeglasses and medication with emergency supplies

#### **During and After an Earthquake**

- If in bed or sitting down, do not get up
- If standing, duck and cover or sit down. You could be thrown to the floor if standing
- Prepare to be self-sufficient for at least three days
- Turn on portable radio for instructions and news reports. For safety,

Cooperate fully with public safety officials and instruction

- If evacuating, leave a message at home telling family members and others where you can be found

In addition, please take the time to read the *Disaster Planning Self-Assessment Guide for Child Care Centers and Family Child Care Homes* provided by CDSS. This publication provides basic disaster preparedness and emergency planning information that can be customized to fit the size and population of your facility and its needs. It is available for review on the CCLD website and is available in both [English](#) and [Espanol](#).

## **SPRING WEATHER HEALTH TIPS**

With spring may come the bloom of allergies that go dormant during the colder winter months when there is not as much pollen in the air. According to the Federal Centers for Disease Control (CDC), allergies occur when a person's immune system overreacts to substances that generally do not affect other people. These substances, or allergens, can cause sneezing, coughing, and itching. Allergic reactions range from merely bothersome to life threatening. Some allergies are seasonal, like hay fever. Allergies have also been associated with chronic conditions like sinusitis and asthma.

If a child has a known allergy, they may avoid contact with the allergen by remaining in an air-conditioned environment during peak hay fever season and avoiding certain foods. Caregivers can eliminate dust mites and animal dander from a child's environment. Other strategies for allergies include taking medication to counteract reactions or minimize symptoms and being immunized with allergy injection therapy. For more information, please check out our [Tip of the Month](#) and visit the CDC website at <http://www.cdc.gov/>.

## **LICENSING MANAGEMENT CHANGES**

I am pleased to announce that Kathy Ertola has been appointed Regional Manager for the River City Child Care Regional Office in Sacramento. This office covers Alpine, Amador, Calaveras, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Tuolumne and Yolo Counties.

Kathy started working in CCLD as a Licensing Program Analyst in 1986. She was promoted to Licensing Program Supervisor in the River City Child Care Regional Office and worked there for five years. After working in Equal Employment Opportunity, and as a County Liaison for our program, she became Chief of the Administrative Legal Services Branch with responsibility for the overall management and supervision of the

Administrative and Program Support Branch of the Legal Division.

Kathy brings a wealth of knowledge and experience to the Regional Manager position, and we feel very lucky to have her joining our team.

Congratulations Kathy!

## **LICENSED CHILD CARE STATISTICS**

Enclosed are the most recent [statistics on licensed child care facilities and capacities](#). Further breakouts by category and location are available.

## **SUMMARY**

If you have questions about items included in this Update, or suggestions for future topics, please contact Gloria Merk, Program Administrator, at (916) 229-4500. You may also visit our internet website at [www.ccld.ca.gov](http://www.ccld.ca.gov) to obtain copies of licensing Updates, office locations, provider letters, regulations, forms, the Licensing Evaluator Manual, or to learn more about licensing programs and services.

Sincerely,

*Original signed by Jo Frederick*

JO FREDERICK  
Deputy Director  
Community Care Licensing Division

Enclosures